

URBAN TAEP COMMUNITY TREE PLANTING PROGRAM APPLICATION

MUST BE RECEIVED BY 4:30 PM JUNE 1, 2020

| Name of Applicant: | | | | | | |
|--|-----------------------------|--|---|------------|--|--|
| Applicant Category: Check One City or Town Co | ounty Non | n-Profit | School | Other Govt | | |
| Title: First Name: | | Last Nam | e: | | | |
| Mailing Address: | | City: | | Zip: | | |
| Physical Address: | | City: | | Zip: | | |
| Phone/ Cell: | _ Phone/ Da | aytime: | | | | |
| Email: Fede | eral Employer Iden | ntification N | umber (FEIN): | | | |
| Check One: Ownership/Control: African American ☐ Person w/Disability ☐ Small Business *Print Name of Authorized Representative | Asian Hispa □ Government | t 🗆 NO1 | tive American Minority/Disac uthorized Repr | | | |
| *Signature of Authorized Representative | | Date | | | | |
| *Person who will sign a contract grant if applicant is accepted. | | Date | | | | |
| Application packet must include the following: Application Form Title VI Questionnaire Project Bid Sheet Soil & Site Form Planting Map | | Supplier Direct Deposit Authorization – Mail Original form to: Address on Form | | | | |
| | ted State Budget | Form | | | | |
| ANY ITEMS PURCHASED OR INVOICED OUT | | | L NOT BE REIMBU | RSED | | |

Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A.* (posted on the Internet at: https://www.tn.gov/content/dam/tn/finance/documents/fa_policies/policy3.pdf

A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the amount of any Grantee failure to meet the MatchRequirement.

The Following is applicable to expense incurred in the period: November 01, 2020 through April 30, 2021

| POLICY 03 Object Line-item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ | GRANT CONTRACT | GRANTEE MATCH (Participation) | TOTAL PROJECT |
|---|--|----------------|----------------------------------|---------------|
| 4,15 | Professional Fee, Grant & Award | | | |
| 5, 6, 7, 8, 9, 10 | Supplies (trees, mulch, shipping & labels) | | | |
| 25 | Grand Total | | | |

Project Bid Sheet

Grant applicants should use this form as a bid sheet. An actual bid from a Tennessee Nursery may be substituted, provide the same information is provided.

Email:

Phone:

Soils and Site Form

| 1. | What is the | soil pH? | | | | | | | |
|---|--|-----------------|---------------|--------------|---------------------|--------------|-----------|-----------|----|
| 2. | Is the soil? Check all that apply | | | | | | | | |
| | □ Sandy | | Rocky | | Heavy Clay | | Dries ver | y quickly | |
| | □ Stays W | et 🗆 | Contains | brick, conci | rete, or other cons | struction re | esidue | | |
| 3. | Rate the soil compaction on the site: Check one | | | | | | | | |
| □ Very compacted □ Somewhat compacted □ No compa | | | | | | action | | | |
| It is assumed the soil around any new constructions is compacted. | | | | | | | | | |
| | Describe your plan to address compaction: | | | | | | | | |
| | | | | | | | | | |
| 4. | 4. Barriers to normal root growth: Check all that apply | | | | | | | | |
| | ☐ Concrete or pavement on all four sides, and less than 16 sq. ft. of soil surface | | | | | | | | |
| | ☐ Concrete or pavement on all four sides, and more than 16 sq. ft. of soil surface | | | | | | | | |
| | ☐ Concrete or pavement on two parallel sides less than 4 ft. apart | | | | | | | | |
| | ☐ Concrete or pavement on two parallel sides greater than 4 ft. apart | | | | | | | | |
| | □ Underlying rock within 2 ft. of the surface | | | | | | | | |
| | Comments: | | | | | | | | |
| | | | | | | | | | |
| 5. | Are overhea | ad lines in the | e area where | trees are t | o planted: | | □ Yes | | No |
| 6. | Are undergr | ound utilitie | s in the area | where tree | es are to be plante | ed: | □ Yes | | No |

Note: Traditional soil maps do not take in account the present condition of urban soils

Three Year Tree Maintenance Plan

Please answer the following questions for your three year maintenance plan.

| 1. | Year One: | Who is responsible for watering the trees? | | | | | | |
|----|---|--|------|-----|--|--|----|--|
| | | What is the frequency the trees will be watered? | | | | | | |
| | Year Two: | Who is responsible for watering the trees? | | | | | | |
| | | What is the frequency the trees will be watered? | | | | | | |
| | Year Three: | Who is responsible for watering the trees? | | | | | | |
| | | What is the frequency the trees will be watered? | | | | | | |
| 2. | Will trees be staked? | | | Yes | | | No | |
| | If trees are sta | | | | | | | |
| 3. | . Describe the steps you will take to prevent damaging trees during mowing and string trimming: | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 4. | Year One: | Describe how you will prune your trees after plant | ing: | | | | | |
| | Year Two & | Describe how you will prune your trees? | | | | | | |
| | Three: | bescribe now you will prune your trees: | | | | | | |
| 5. | Year One: | How will you fertilize your new trees? | | | | | | |
| | | | | | | | | |
| | Year Two & Three: | How will you fertilize your trees? | | | | | | |
| 6 | Year Two & | How will you re-mulch? | | | | | | |
| | Three: | | | | | | | |
| 7. | How often will you inspect for insects or disease? | | | | | | | |
| | How will you inspect and treat any insect or disease problems that may occur? | | | | | | | |
| | | | | | | | | |
| | Other tree maintenance comments: Please use another sheet if needed | | | | | | | |